L&R

L&R INTERNAL USE ONLY

Caresia™ Order Form

1 Order Information

Order Date: ____ / ____ / ____ Contact Name: _____ Phone: _____

P.O. #: _____ Email: _____ Fax: _____

2 Billing Information

Account #: _____

Bill to: _____

Attn: _____

Address: _____

City: _____ State: _____ Zip: _____

Card #: _____ Exp: ___ / ___ SID: ____

3 Shipping Information

☐ Same Address as Billing

Ship to: _____

Attn: _____

Address: _____

City: _____ State: _____ Zip: _____

Shipping: ☐Ground ☐2nd Day ☐Overnight

4 Products

Caresia MCP to Axilla

Style	Size	Qty.
☐ Left ☐ Right	☐ S ☐ M ☐ L	
☐ Left ☐ Right	☐ S ☐ M ☐ L	
☐ Left ☐ Right	☐ S ☐ M ☐ L	

Caresia Below Knee

Length	Size	Qty.
☐ Short ☐ Average ☐ Tall	☐ S ☐ M ☐ L	
☐ Short ☐ Average ☐ Tall	☐ S ☐ M ☐ L	
☐ Short ☐ Average ☐ Tall	☐ S ☐ M ☐ L	

Careisa Wrist to Axilla

Style	Girth	Qty.
☐ Left ☐ Right	☐ S ☐ M ☐ L	
☐ Left ☐ Right	☐ S ☐ M ☐ L	
☐ Left ☐ Right	☐ S ☐ M ☐ L	

Caresia Thigh

Length	Size	Qty.
☐ Short ☐ Average ☐ Tall	☐ S ☐ M ☐ L	
☐ Short ☐ Average ☐ Tall	☐ S ☐ M ☐ L	
☐ Short ☐ Average ☐ Tall	☐ S ☐ M ☐ L	

Caresia Glove

Size	Qty.
☐ Small ☐ Medium ☐ Large	
☐ Small ☐ Medium ☐ Large	

Caresia Foot

Size	Qty.
☐ Small ☐ Medium ☐ Large	
☐ Small ☐ Medium ☐ Large	

Caresia Gauntlet

Size	Qty.
☐ Small ☐ Medium ☐ Large	
☐ Small ☐ Medium ☐ Large	